

## 2008-2009 CAREER AND TECHNICAL EDUCATION STUDENT ENROLLMENT REPORT

DUE DATE: FEBRUARY 25, 2009

## **INSTRUCTIONS**

- Information provided on this form is used to determine eligibility for state secondary Career and Technical Education appropriation for FY10 and for Carl D. Perkins accountability reporting.
- Complete a separate sheet for each career and technical instructor.
- If an instructor teaches classes in more than one program area, complete a separate sheet for each program.
- If an instructor teaches at more than one high school, complete a separate sheet for each school.
- **Attach** current course descriptions for all courses within the program area.
- \* Attach a Master Schedule for the high school (if available).
- Incomplete forms will be returned without action.

<ul> <li>Use the Tab key or your mouse to advance through this form.</li> <li>If you need assistance with this form, please contact Diana Fiedler at (406) 444-9019 or <a href="mailto:dfiedler@mt.gov">dfiedler@mt.gov</a></li> </ul>										
School District Name: High School Name (if different):										
Program Area:  Agriculture Education (Instructor must have Agriculture endorsement)  Family & Consumer Sciences Education (Instructor must have Family & Consumer Sciences endorsement)  The following Career and Technical Student Organ  BPA  DECA  FCCLA		<ul> <li>☐ Health Occupations Education (Instructor must have Trade and Industry Health Occupations endorsement )</li> <li>☐ Trade and Industrial Education (Instructor must have Trade and Industry endorsement)</li> <li>on and is an active component of this progenical series of the p</li></ul>	instructor in this program area.							
Instructor Information: Report the following information exactly as it appears on the instructor's educator license (a.k.a. teaching certificate).  Name: Folio Number:  Endorsement(s) Held: Expiration Date:  Does instructor have an extended contract (for <u>supervision of CTE students</u> beyond the school year)? (Yes/No) If yes, for how many <u>days</u> ?  Instructor Contact Information: Work Telephone: Work Fax: E-mail:										
COMPLETE CLASS SCHEDULE ON BACK										

Class Schedule (attach current course descriptions) List all terms consecutively.  Teacher Name:				School Name:				
Period	Course Title			Type of Term	Total Number of Minutes This Clas Meets Per Year	s   Maies	Females Enrolled	Grade Level(s)
1	Example 1: Accounting I		ites are calculated using a inutes per day X 90 days.	Semester	4,050	12	13	9-10
2A	Example 2: Graphic Design	The example minu	ites are calculated using a inutes per day X 60 days.	Trimester	4,500	6	8	12
For OPI U	Jse Only		_	xxxx	xxxx			xxxx
Program Approved CTSO Confirmed				Number of Ext. Contract Days Average Males				
	ndorsement			Enrollment		Females		